



South Africa- Lesotho

Local Links Project for OVC

The Workshop on the OVC Rapid Assessment
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Background

- Local Links is a joint country programme between CARE Kenya & CARE SA
- In South Africa – Local Links is implemented through **partnerships** in:
 - ❖ **Limpopo Province** – Mopani & Sekhukhune
 - ❖ **Free State Province** – Motheo & Thabomofutsyane districts

The programming framework

- It is based on CARE's Livelihood Framework
- The framework investigates factors that contribute to household vulnerability & develops interventions that contribute to “security” of families & communities.

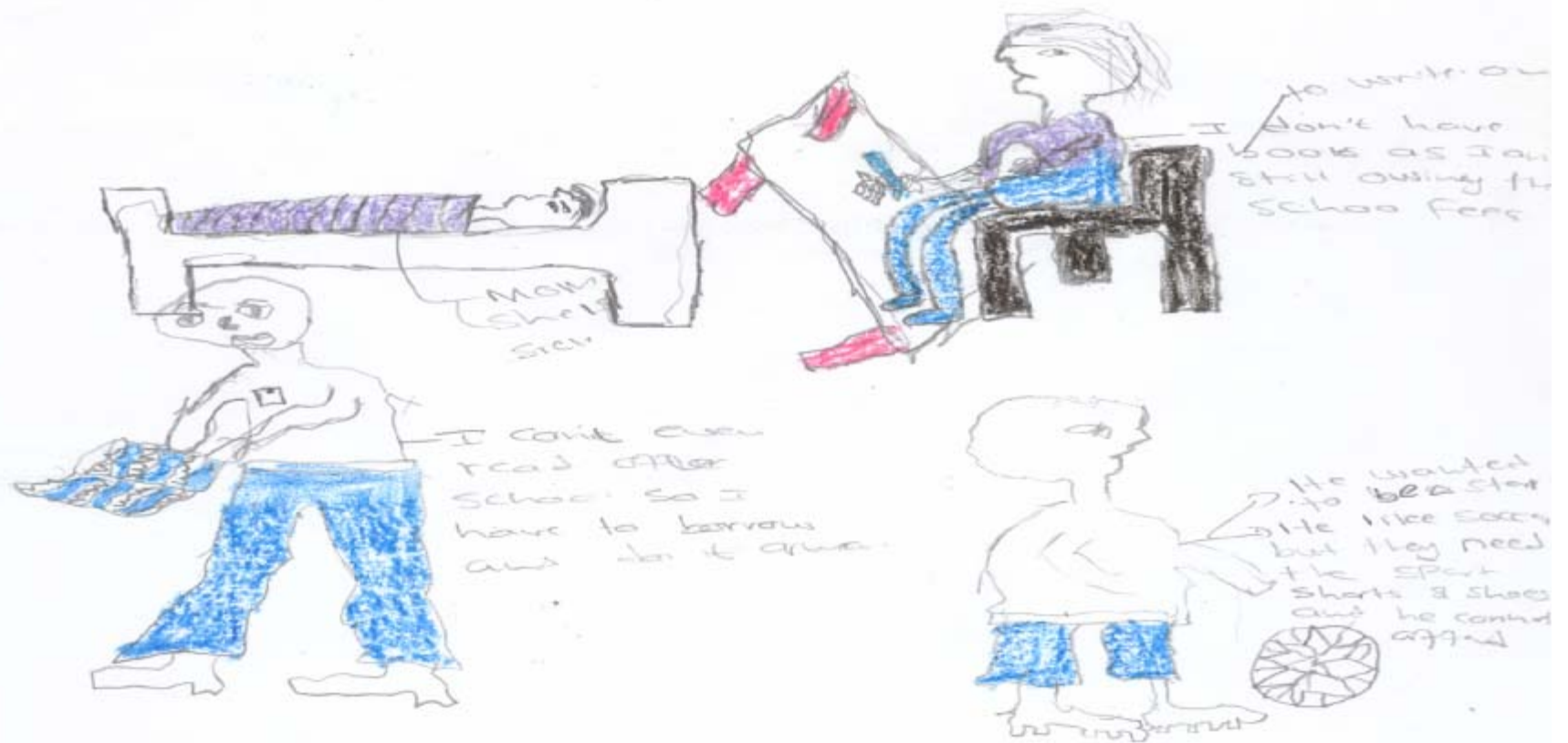
Sekhukhune Land Example

CARE did research to identify gaps in OVC services. We did *interviews, surveys & focus groups etc*, for example,

- With children at home & in Schools;
- With local NGOs/CBOs,
- Various local government institutions,
- Visited households.

Family Interviews

Boy - family 4
16 yrs ✓



Post it home.

Something with the little that she has
She might pay the school fees & buy
me soccer gear.

Children are burdened by care but to be involved and identified priest to do this and the need for prayer

(PROBLEMS / WORRIES)

Gil - 11 years
F: 5



• we do not have a car at home which was going to be useful (taking them to the hospital)

Therefore

**Local Links is designed
as an integrated
intervention for children
& their families affected
By HIV/AIDS**

Local Links Objectives

- ❑ Strengthen economic coping mechanisms of OVC families & their communities
- ❑ Strengthen capacity of local organisations to provide a range of services to OVCs & their families
- ❑ Improve on advocacy for and with OVCs



Objective 2 & 3 examples implemented by our partners that we support

- Circle of support
- Participatory theatre
- Psychosocial support
(schools, homes, churches, support groups for children & care givers etc)
- Care centers
- Food gardens
- Relief & supervision of care & daily chores

Advocacy issues

- Stigma & discrimination – has implications for disclosure
- Access to social grants & public servants attitude
- Access to basic health care
- Access to education
- Burnout of care givers & load they carry & volunteerism burden
- Need for coordination & too many structures

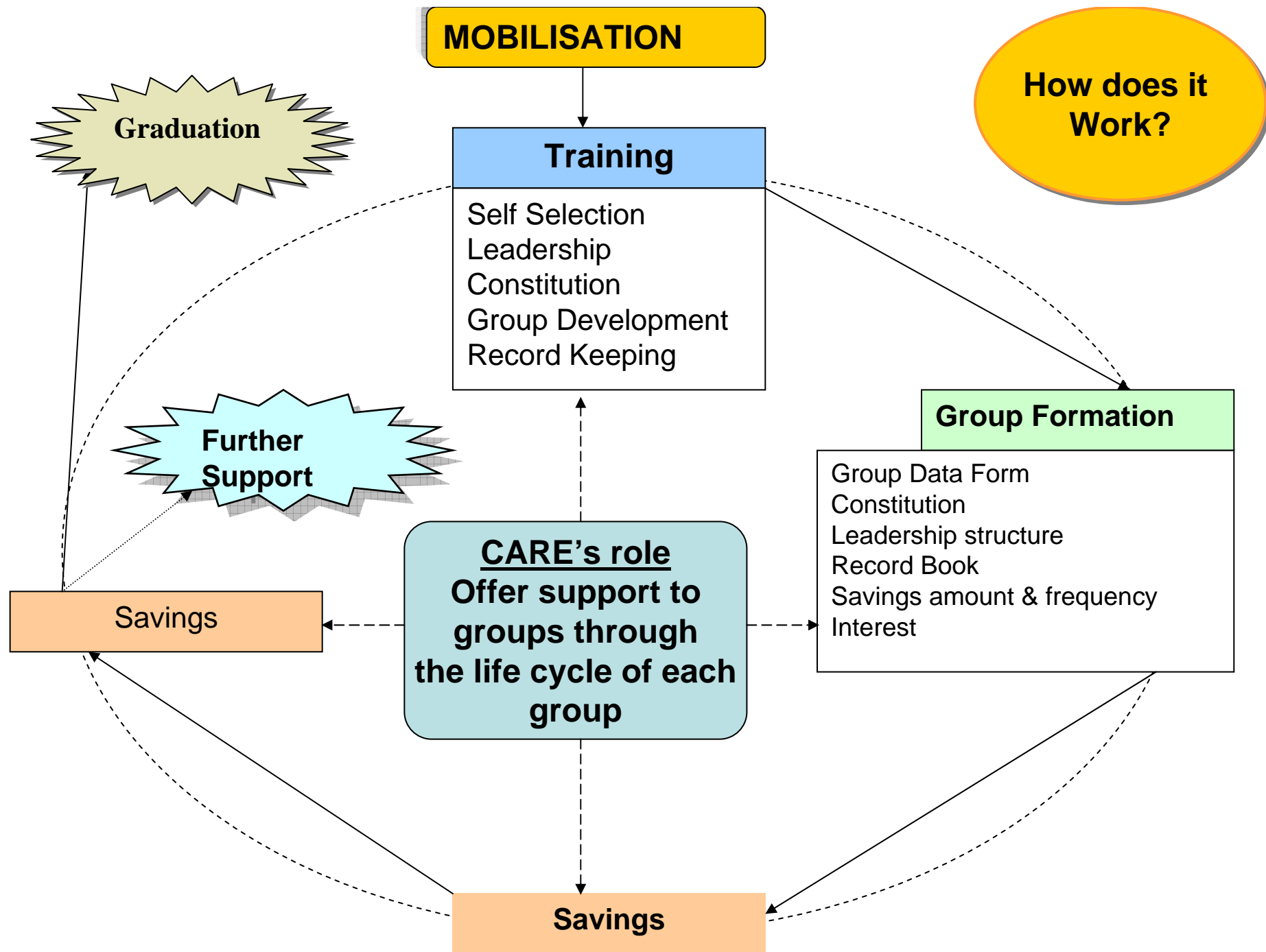
How is Objective 1 implemented?

Through
Voluntary Savings & Loans (VSL)
programme

VSL is:

- Savings based micro-finance model
- It is participatory
- Uses human & financial resources exiting in the community
- The programme intentionally seeks to locate the locus of control within the the groups

To grow the group funds
The groups do **internal lending**
& the monthly cycle is **one month**



Lessons Learnt

- VSL - Direct mechanisms for impacting on children's lives
- VSL- Social support network
- VSL- Builds confidence & overcomes feelings of hopelessness & helplessness
- Eliminates dependency on loan sharks
- Incomes earned is used for household sustainability, particularly OVC well being

Lessons Learnt

- When basic needs have been met, the loans are then used for productive purposes – there is now a growing demand for enterprise skills
- Builds on existing community resources rather than external interventions that tend to be unsustainable
- It is an entry point for other OVC related services
- Reducing poverty is critical in the fight against HIV/AIDS

Voices from VSL Members & Children

Through the income from VSL, I am now able to buy food & clothes for the orphans that I am looking after

The school was surprised that I was one the first people to pay school fees this year

I am now able to buy bus tickets and make food my children when they go to school

My wife passed away, my participation in the group enables me to buy food for my children

The money lenders are wondering as to what happened to their customers, we are now our own loan sharks

Our children will never go to bed without a meal

I have nine children, I now have a vegetable garden and I am able to feed my children

Since my grandfather is part of the VSL, he is able to buy food for us

CARE where were you when we needed you?

Challenges

- Established NGOs are skeptical about VSL – because is seen as not part of their core business - sometimes a conflict to their micro-credit based programmes
- Coping with the VSL & entrepreneurship training demand.
- CBOs that are able to reach the most vulnerable – they often lack capacity & volunteers are often not different to the members they service
- CARE's role is mainly to strengthen the child and family programs. Ongoing support is needed for “volunteer” implementers.
- For the future CARE to consider partnering with other PEPFAR treatment partners.

Challenges

- Loss of social grant – when the CD4count of participants improves
- Support indigenous & traditional practices for child rearing & dealing with trauma & grief